

2022 Benefit Summary

	EUPA	ACEA	MCEA	AMPU	EXME	PANS	IBEW	IAFF	APOA	AFCA	APMA
2022 City Contribution to Health Coverage											
For Plan A employees in the MCEA, EUPA, EXME, AMPU and AFCA bargaining units see MOU or Compensation Plan for City Contribution and cash back amounts.											
Waiver of Coverage	\$230/cash back										
Employee Only	\$952.11						\$970.50	\$1,097.90		\$1,041.45	
Two Party	\$1,904.21						\$1,941.00	\$2,019.92		\$1,963.47	
Family	\$2,475.48						\$2,523.31	\$2,573.13		\$2,516.68	
Dental Coverage											
City Paid Enrollment Mandatory Delta Dental	\$2,600 per person/year maximum \$2,500 per person ortho lifetime maximum 80% Coverage/50% Ortho \$129.60/month						\$2,600 pp/yr. \$2,500 pp ortho life 90% cost coverage/50% Ortho City Paid \$156.30 / month				
Vision Coverage											
Employee Paid Enrollment Voluntary VSP Vision	Employee Only: \$7.80/month Two Party: \$15.10/month Family: \$24.00/month										
	Members enrolled in qualifying health plan may be eligible for City covered premium	(Fully paid by employee)					(City/Employee Paid - 50/50 Split)				
Life and AD&D Coverage											
City Paid Enrollment Mandatory Voya	Life: \$100,000 \$16.90 / month				Life: \$50,000 \$8.45/month				Life: \$100,000 \$16.90 / month		
	Life and AD&D: \$0.169 per \$1,000 (Life: \$0.132 per \$1,000 / AD&D: \$0.037 per \$1,000)										
Supplemental Life and AD&D											
Employee Paid Enrollment Voluntary Voya	Supplemental Life Insurance* Maximum amount \$500,000; Minimum \$10,000/Increments \$10,000										
	Spousal Life Insurance** Only available to EEs who have purchased supplemental life insurance for themselves. Maximum amount \$100,000 Minimum \$5,000/Increments \$5,000. Cannot exceed half of employees' supplemental life insurance.										
	Dependent Child(ren) Benefit Only available to EEs who have purchased supplemental life insurance for themselves. Guaranteed Amount for child(ren) age 14 days - 6 months-\$1,000, for child(ren) 6 months-19 yrs. (or 26 yrs. if full-time student)-\$10,000										
Flexible Spending Account (FSA)											
Employee Paid Enrollment Voluntary Discovery Benefits	Medical FSA Maximum Annual Contribution-\$2,750/calendar year Dependent Care FSA Maximum Contribution- \$5,000 per calendar year (\$2,500 per calendar year if Married Filing Separately) Administrative Fee- \$4.25/month Annual pre-tax election cannot be modified unless a qualifying event occurs. All funds not used at the end of the 90 day grace period, will be forfeited.										
Transportation Savings Account (TSA)											
Employee Paid Enrollment Voluntary Discovery Benefits	Maximum Monthly Pre-Tax Contribution Parking-\$260/month / Transit- \$260/month (Administrative Fee- Paid by City) Enrollment can be month to month or ongoing (Deadline to submit enrollment form is the 10th of every month, for benefit effective date of the 1st of the following month.).										
Deferred Compensation Plan											
Employee Paid Enrollment Voluntary ICMA, Nationwide & Voya	Current providers: ICMA, Nationwide, and CalPERS (VOYA) Maximum Annual Pre-Tax amount- \$20,500/year "Age 50" Catch Up Limit \$6,500/year "Pre-Retirement" Catch Up Limit \$20,500/year After 1 year of service, City contributes 1% base salary per month if employee contributes at least .5% base salary per month - AMPU, EUPA, EXME and PANS members ONLY Contribution changes can be made monthly by submitting a change form to the Payroll Department.										

*Rates based on age of employee at start of year - rate chart available on Human Resources website or provided upon request

**Rates based on age of spouse at start of year - rate chart available on Human Resources website or provided upon request

ACCESS THE EMPLOYEE ASSISTANCE PROGRAM BY CALLING 1-800-242-6220 OR VISITING MEMBERS.MHN.COM (ACCESS CODE: alameda)